OFFICE OF SPECIAL HOUSING INTIATIVES

CLEARANCE OF INDIVIDUAL/ENTITY FORM

DCA is required to verify that each contractor or entity involved in a project funded with HOME monies are not included on the "List of Parties Excluded from Federal Procurement and Non-procurement Programs." Each Owner is required to submit this Form for each Individual/Entity involved in this project prior to entering into an Agreement for the receipt of HOME funds. Any changes or additions to the list of Individuals/Entities involved in the project must be cleared by DCA prior to the beginning of their involvement in the project. A separate form is required for each Individual/Entity. Forms should be submitted directly to the Contact Person listed in the DCA Agreement for funding.

PROJECT INFORMATION: Name of Project: DCA Program Name: Name of Project Contact:_____ Address of Project Contact:_____ Phone Number of Project Contact: Email Address of Project Contact: INFORMATION ON INDIVIDUAL/ENTITY FOR WHICH CLEARANCE IS **REQUESTED:** Individual/Entity Name: Address: Role in Project: Project Owner/Contractor/Subcontractor Type of Work in Project: DCA REVIEW: Cleared:_____ Not Cleared:_____ Review Performed by: Signature:_____

FORM SFD-3 October 2007